## FORM D



# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROV	AL
OMB Number: 3	235-0076
Expires: December	31, 1996
Estimated average b	urden
hours per response	16.00

SEC USE ONLY			
Prefix	Serial		
DATE F	RECEIVED		

Series A-1 Convertible Preferred Filing Under (Check box(es) that		Section 4(6) ULO	DOCESSE
		Section 4(6) ULO	<b>BKOCE33FF</b>
Type of Filing:	A. BASIC IDENTIFICATION DATA	<u> </u>	JUN 02 2004
1. Enter the information requeste			JUN 0 ~ ===
	is is an amendment and name has changed, and indic	cate change.)	THOMSON FINANCIAL
Address of Executive Offices 374 Congress St.	(Number and Street, City, State, Zip Code) Boston, MA 02210	Telephone Number (Includi (617) 357-4600	ng Area Code)
Address of Principal Business Op (if different from Executive Office	perations (Number and Street, City, State, Zip Code)	Telephone Number (Includi	ng Area Code)
Brief Description of Business  Retirement financial planning			
Type of Business Organization  Corporation	☐ limited partnership, already formed	other (please specify);	ECENED 2 4 20
business trust	☐ limited partnership, to be formed		S S
	Month Year	No.	

### GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20349.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	A BASIC IDENT	FICATION DATA		
2. Enter the information requested		FICATION DATA		
•	, if the issuer has been organized	i within the past five ve	er <b>e</b> t	
	g the power to vote or dispose, of	•	•	or more of a class of equity
· ·	rector of corporate issuers and of	f corporate general and m	anaging narrne	rs of partnership issuers: and
	partner of partnership issuers.	e corporato general ana m	ranaging partite	is or partnership assects, and
Check Box(es) that Apply:   Pr	omoter 🛮 Beneficial Owner	⊠ Executive Officer	⊠ Director	☐ General and/or Managing Partner
Full Name (Last name first, if indi-	vidual)		**************************************	ivialiaging Partner
Bhatia, Sunil				
	lumber and Street, City, State, 2	Zip Code)	<del></del>	
374 Congress St., Boston, MA 022		•		
	omoter S Beneficial Owner	⊠ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if indiv	vidual)			
Nada, Sherif A.	**			
Business or Residence Address (N	number and Street, City, State, 2	Zip Code)	<del></del>	
374 Congress St., Boston, MA 022	10			
Check Box(es) that Apply: 🗆 Pro	omoter   Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if indiv	idual)			
Business or Residence Address (N	umber and Street, City, State, 2	Cip Code)	<del></del>	
Check Box(es) that Apply:	moter	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if indiv	idual)			
Business or Residence Address (N	umber and Street, City, State, 2	(ip Codé)	<del></del>	
Check Box(es) that Apply:   Pro	omoter   Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
			Director	Managing Partner
Full Name (Last name first, if indiv	idual)			
Business or Residence Address (N	umber and Street, City, State, 2	Cip Code)		
Check Box(es) that Apply:   Pro	moter	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if indiv	idual)			
Business or Residence Address (N	umber and Street, City, State, Z	ip Code)		
Check Box(es) that Apply:   Pro	noter	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
full Name (Last name first, if indiv	idual)		· · · · · · · · · · · · · · · · · · ·	
Business or Residence Address (N	umber and Street, City, State, Z	ip Code)		

				B. 1	NFORMA	TION AE	OUT OFF	ERING	•				
1. Has	the issuer	sold, or d	oes the iss						is offering	?		Yes ⊠	No
							ın 2, if fili		_			🕰	_
2. Wha	at is the m	inimum in						-				sN/A	Ą
						,				•••••		Yes	No
3. Doe	s the offer	ing permit	joint own	ership of	a single ur	nit?					• • • • • • • • •	X	1
sion to b list t	er the inform or similar noted is a the name of lealer, you	remunerati n associati f the brok	ion for soli ed person e er or deale	citation of or agent of er. If more	purchaser f a broker than five	s in connect or dealer 1 (5) person	ction with s registered v s to be list	ales of secu with the SE ed are asso	urities in the C and/or	e offering.	If a perso	on S.	
Full Nam	e (Last nat	ne first, if	individua	1)							*****		
N/A													
	or Residen	e Address	(Number	and Street	t, City, St	ate, Zip C	ode)					····	
Name of	Associated	Broker or	Dealer		<u>-</u>			<del></del>			***		
States in	Which Per	on Listed	Has Solic	ited or Int	ends to So	olicit Purcl	nasers						
(Check	"All State	s'' or chec	k individu	al States)					· · · · · · · · · · · · · · · · · · ·				States
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	e (Last nar									, ,			
Business o	or Residenc	e Address	(Number	and Street	, City, Sta	ate, Zip Co	ode)						
Name of	Associated	Broker or	Dealer			<u></u>					· · · · · · · · · · · · · · · · · · ·		
States in	Which Pers	on Listed	Has Solic	ited or Int	ends to Sc	olicit Purch	nasers		-				
(Check	"All State	s" or chec	k individu	al States)									States
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t un ivami	c (Last Hui)	11131, 11	marriage	••									
Business o	or Residence	e Address	(Number	and Street	, City, Sta	ite, Zip Co	ode)						
Name of	Associated	Broker or	Dealer					<u> </u>					
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	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box   and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
•	Type of Security	Aggregate Offering Price	Amount Alread
	Debt	\$	S
	Equity	<b>\$</b> \$150,000.00	<b>\$</b> 150,000.00
	□ Common ⊠ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		
	Other (Specify)		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		
(	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	2	<u>\$ 150,000.00</u>
	Non-accredited Investors		S
	Total (for filings under Rule 504 only)	2	<b>s</b> _150,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
t	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securi- ties sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		<b>S</b>
	Regulation A		S
	Rule 504		<u> </u>
	Total	0	<b>s</b> 0
s 7	Expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		<b>S</b>
	Printing and Engraving Costs		\$
	Legal Fees	<b>S</b>	\$5,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) Blue Sky Filing Fees	⊠	\$ <u>0</u>
			- 5 000 00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND	USE	OF PROCEEDS	
b. Enter the difference between the aggregate of tion 1 and total expenses furnished in response "adjusted gross proceeds to the issuer."	to Part C - Question 4.a. This difference	is the	<b>;</b>	<b>\$</b> 145.000
5. Indicate below the amount of the adjusted gros used for each of the purposes shown. If the amestimate and check the box to the left of the estin the adjusted gross proceeds to the issuer set for	sount for any purpose is not known, furninate. The total of the payments listed must	sh an equal	i 	
			Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees	•••••	<b>⊗</b> \$	2,000.00	<u> </u>
Purchase of real estate	••••••	□ \$		<b>S</b>
Purchase, rental or leasing and installation	of machinery and equipment	<b>□</b> \$		\$
Construction or leasing of plant buildings a	nd facilities	□ <b>s</b>		\$
Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)	he assets or securities of another	□ <b>\$</b> .		s
Repayment of indebtedness	•••••	□ <b>s</b> .	0	S
Working capital	•••••	凶 s		
Other (specify):		□ <b>\$</b> .		s
	****	□ <b>s</b>		s
Column Totals		<b>□</b> \$		\$
Total Payments Listed (column totals added	h)		Ď <b>s</b> 145	,000.00
	D. FEDERAL SIGNATURE			
The issuer has duly caused this notice to be signed I following signature constitutes an undertaking by the quest of its staff, the information furnished by the	e issuer to furnish to the U.S. Securities an	d Exc	change Commission,	upon written re-
Issuer (Print or Type)	Signature		Date     0.5 /	/1/7/04
LTSave, Inc. Name of Signer (Print or Type)	Title of Signer (Print or Type)			
• • • • • • • • • • • • • • • • • • • •				•
Sunil Bhatia	President			